State of Michigan Department of Labor and Economic Growth MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY P.O. BOX 30044 – Lansing, MI 48909

This form is issued under authority of Act 346 P.A. 1966. Completion and execution of this form is required. Failure to complete and execute this form may result in the termination of the construction contract.

CONTRACT AWARD AND UTILIZATION COMMITMENT

DEVELOPMENT NAME AND N	NUMBER		
Development Location			
SPONSOR(S) Minority or Female Ownership	Black/African American	% Hispanic or Latino% Asian% e% Native Hawaiian or Other Pacific Islander% Other	%
GENERAL CONTRACTOR	Business Name Address		
	Principal Owner	IRS No	
Minority or Female Ownership	Black/African American	% Hispanic or Latino% Asian% e% Native Hawaiian or Other Pacific Islander% Other	%
Construction Contract Amount Estimated Starting Date	\$	Date of Award Estimated Completion Date	
SUBCONTRACTOR	Business Name Address		
	Telephone (IRS No	
	Principal Owner EEO Officer	<u> </u>	
Minority <u>or</u> Female Ownership	Black/African American% American Indian or Alaska Native	% Hispanic or Latino% Asian% e% Native Hawaiian or Other Pacific Islander% Other	%
Subcontract Amount	\$	Contract Date	
If Joint Venture	Amount Minority: \$	Amount Majority: \$ Amount Woman-Owned: \$	
Type of Contract	Trade	Professional or Supplier Service	
	Tier	If third tier, to whom:	
Estimated Starting Date:		Estimated Completion Date:	
	, we hereby commit our firm to prov % minorities and% fe	vide a total workforce integration of males in each skilled trade.	
Signature of Subcontractor's EEO Officer Date			
ACKNOWLEDGEMENT BY GENERAL CONTRACTOR			
Signature of General Contractor's EEO Officer Date			